



leading the way to environmental excellence

Governor James E. McGreevey
Commissioner Bradley M. Campbell

Request for Compliance Assistance

Date: _____

Facility Name:

Mailing Address:

Street _____

City _____ County

State _____ Zip Code _____

Location Address (if different than mailing address):

Street _____

Facility Contact Person: _____ Title: _____

Phone # _____ Fax # _____

Do you have an environmental manager or environmental consultant? **G** Yes **G** No

If you are a small business, how many full-time employees do you have company-wide?

If you are a local government, how many residents do you serve?

Describe the nature of your

business: _____

Type of assistance requested (you may check more than one media program):

G Air

APC Plant Id#: _____

Permit #(s): _____

Description of assistance requested:

G Water

Permit #(s): _____

Description of assistance requested:

G Hazardous

USEPA Id#: NJ _____

Waste

Description of assistance requested:

G Solid Waste

Registration/Permit #: _____

Registration/Permit Type: _____

Description of assistance requested:

G Toxic TCPA Id#: _____

Catastrophe Description of assistance requested:

Prevention

Act

G Discharge Facility Id#: _____

Prevention, Description of assistance requested:

Containment

And

Countermeasures

G Right to Employer Identification Number (EIN): _____

Know Description of assistance requested:

*Are you currently involved with the Department in any ongoing enforcement matters? **G** Yes **G** No

If so, describe:

*The Department will not provide on-site compliance assistance under this pilot program in connection with any matter that is the subject of an ongoing investigation or pending enforcement action. However, you may still request assistance on other matters.

Is there any other type of assistance you need from the Department? **G** Yes **G** No

If so,

describe: _____

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Where did you hear about this program (you may check more than one)?

G Trade Association: _____

G Newspaper

G Mailing

G New Jersey Register

G Other: _____

Return completed application to:

NJ Department of Environmental Protection
Office of Compliance & Enforcement
PO Box 422
401 East State Street, 4th floor
Trenton, NJ 08625-0422
Attn: Mary C. Siller